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SECRETARY OF STATE IVISION OF CORPORATIONS

N COOPER AUG 1 7 2018

## **COVER LETTER**

TO: Registration Sect Division of Corpo			
SUBJECT. Deerf	ield Cove Center	LLC.	
SOBJEC1	Name of Limit	ed Liability Company	
The enclosed Articles of A	mendment and fee(s) are subn	nitted for filing.	
Please return all correspond	dence concerning this matter t	o the following:	
	Phyllis Robi	nson	
		Name of Person	<del></del>
Division of Corporations  SUBJECT: Deerfield Cove Center LLC.  Name of Limited Liability Company  The enclosed Articles of Amendment and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:  Phyllis Robinson  Name of Person  Deerfield Cove Center, LLC  Firm/Company  48 E Royal Palm Road  Address  Boca Raton, FL 33432  City/State and Zip Code  jeanne@bocacenters.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  Phyllis Robinson  Name of Person  Name of Person  The concerning this matter of Status  Certificate of Status  Certified Copy (edditional copy is enclosed)  Source of Status Certificate of Status  Certificate of Status  Certificate of Status  Certificate copy is enclosed)			
	Deerfield Cove Center LLC.   Name of Limited Liability Company		
	48 E Royal P	alm Road	
		Address	
	Boca Raton,	FL 33432	
		Name of Limited Liability Company  re(s) are submitted for filing.  g this matter to the following:  is Robinson  Name of Person  ield Cove Center, LLC  Firm/Company  Royal Palm Road  Address  Raton, FL 33432  City/State and Zip Code  e@bocacenters.com nail address: (to be used for future annual report notification)  mer. please call:  at (561)  Area Code  Daytime Telephone Number  int:  g Fee & S55.00 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)  (additional copy is enclosed)	
	E-mail address: (1	to be used for future annual report notif	ication)
For further information co	ncerning this matter, please ca	all:	
Phyllis Rob	inson	at (561 ) 368-185	52
Name of	Person		: Telephone Number
Enclosed is a check for the	e following amount:		
□ \$25.00 Filing Fee		Certified Copy	Certificate of Status &
MAILI	NG ADDRESS:	STREET/COURI	ER ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company (A Florida Limited Lia	v <u>as it now apper</u> ability Company)	ars on our records.)	
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	vere filed on _	6/14/2006	and assigned
Florida document numberL06000061988			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	ity company l	<u>here</u> :	
•			
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the	designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)  The Articles of Organization for this Limited Liability Company were filed on	—— <del>55</del> <del>∑</del> 5		
			<u>- ≥ SER</u>
			<b></b> 25±
The second discontinuous if applicables			$\omega$
_	(Name of the Limited Liability Company as it now appears on our records.)  (A Florida Limited Liability Company)  (A Florida Limited Liability Company Nergistered Agent:  (A Florida Limited Liability Company)  (A Florida Limited Liability Company)  (A Florida Limited Liability Company Nergistered Agent:  (A Florida Limited Liability Company Nergistered Agent	<b>₹</b> \$90	
The Articles of Organization for this Limited Liability Company were filed of Storida document numberL06000061988  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company. The new name must be distinguishable and contain the words "Limited Liability Company. Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address MUST BE A STREET ADDRESS)  Enter new mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Provisions of all statutes relative to the proper and complete performance accept the obligations of my position as registered agent as provided fibeing filed to merely reflect a change in the registered office address, and the registered office address.		<u> </u>	<u> </u>
			<del></del>
			· •
B. If amending the registered agent and/or registered off	fice address	on our records, <u>ente</u>	r the name of the new
registered agent and/or the new registered office address here	:		
Name of New Registered Agent:			
1000			
The Articles of Organization for this Limited Liability Company were inted on Florida document numberL0600061988			
	Cin	, Florida _	7in Code
	Ciţ		Σιρ Code
New Registered Agent's Signature, if changing Registered Agent:			
provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office	performance provided for it	of my duties, and I an n Chapter 605, F.S. C	n familiar with and or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Hinda Bramnick	48 E Royal Palm Road Boca Raton, FL 33432	<b>½</b> 1 Add
			□ Remove
			☐ Change
		·	
			□ Remove
			Change
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			Change
			□ Add
			☐ Remove
			☐ Change

Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.  the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier.)  The 90th day after the record is filed.	-							
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	he record spec The 90th da	ifies a delayed ef after the record	ffective date, but is filed.	ut not an effec	tive time, at 12:	01 a.m. on th	e earlie	ier
Dated July 31, 2018  Signature of a member or authorized representative of a member		Jul	y 31 201	8				

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Filing Fee: S25.00